

L04000089178

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

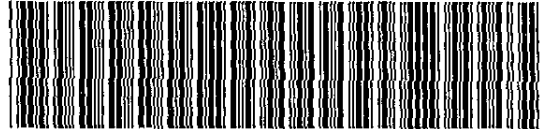
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800044512928

01/19/05--01002--003 **55.00

FILED
2005 JAN 18 AM 9:11
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RECEIVED
05 JAN 18 PM 3:12
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

JAN 19 2005

CORP DIRECT AGENTS, INC. (formerly CCRS)
103 N. MERIDIAN STREET, LOWER LEVEL
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: KATIE WONSCH

DATE: 1/18/05

REF. #: 01197.33899

CORP. NAME: JMJ MASTERPIECE PROPERTIES, LLC

FILED
2005 JAN 18 AM 9:11
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

- | | | |
|---|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input checked="" type="checkbox"/> OTHER: CORRECTION | | |

STATE FEES PREPAID WITH CHECK# 511077 FOR \$ 55.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:
JMJ Masterpiece Properties, LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:
Incorrect statement -- Michael Jones, Manager

Correct statement -- J. Michael Jones, Managing Member

6415 Thomas Drive

Panama City Beach, Florida 32408

OR

Was defectively signed. The manner in which the document was defectively signed and the appropriate correction is as follows:

Dated: January 18 2005

Catherine S. Hester
Signature of a member or authorized representative of a member

Catherine S. Hester

Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
2005 JAN 18 AM 9:11
FILED

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L04000089178
FILED 8:00 AM
December 10, 2004
Sec. Of State
Tallahassee, Florida

Article I

The name of the Limited Liability Company is:
JMJ MASTERPIECE PROPERTIES, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
6415 THOMAS DRIVE
PANAMA CITY BEACH, FL. US 32408

The mailing address of the Limited Liability Company is:
6415 THOMAS DRIVE
PANAMA CITY BEACH, FL. US 32408

Article III

The purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:
HARRISON, RIVARD, ZIMMERMAN & BENNETT CHTD
112 E. 3RD COURT
PANAMA CITY, FL. 32401

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: DERRICK BENNETT

FILED
2005 JAN 18 AM 9:11
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Article V

The name and address of managing members/managers are:

Title: MGR
MICHAEL JONES
6415 THOMAS DRIVE
PANAMA CITY BEACH, FL. 32408 US

L04000089178
FILED 8:00 AM
December 10, 2004
Sec. Of State
Iivers

Article VI

The effective date for this Limited Liability Company shall be:

12/07/2004

Signature of member or an authorized representative of a member

Signature: DERRICK BENNETT

FILED
2005 JAN 18 AM 9:11
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA